INDIVIDUALS NOT LISTED ON THIS FORM WILL NOT BE GRANTED ACCESS! FORM MUST BE FILLED OUT AND RETURNED TO YOUR RECRUIT [POSTMARKED] WITHIN SEVEN DAYS OF RECEIPT!

From:						
1101111	(RECRUIT'S NAME: LAST, FIRST MIDDLE INITIAL)					
	SHIP/DIV:/ Projected Graduation Date:					
To:	Security Department, Recruit Training Command					
Via:	Security Officer, Naval Station Great Lakes					
Subj:	RECRUIT TRAINING COMMAND (RTC) VISITOR REQUEST LETTER					

Ref: (a) NSGLINST 5530.1

MEMORANDUM

- 1. Per reference (a), in preparation of your visitors RTC graduation attendance, all visitors should be listed below. I understand that all US Citizens/Resident Aliens listed will have a criminal background check. All Non-US Citizens/Resident Aliens will be considered for installation access on a case-by-case basis. I shall **NOT** knowingly request access for individuals meeting any of the following restrictions, including:
 - a. An outstanding warrant, current probation/parole or a registered sex offender;
 - b. Any narcotics related offense within the last 10 years, and/or
 - c. Any other serious offense.
- 2. I hereby request the following, not more than four individuals, be granted access to RTC Great Lakes:

PRINT OR TYPE ONLY (MUST BE LEGIBLE OR ACCESS WILL BE DENIED)

	TRETTOR	,				
	<u>Last Name</u>	First Name	<u>MI</u>	State ID Number	State	DOB(MM/DD/YR)
1.						
	A d duesa	C:4	C4040	7:- anda		Email Adduses
	Address	<u>City</u>	<u>State</u>	Zip code		Email Address
	Last Name	First Name	<u>MI</u>	State ID Number	State	DOB(MM/DD/YR)
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2.		G.	G	F71 1		
	<u>Address</u>	<u>City</u>	State	Zip code		Email Address
	Last Name	First Name	<u>MI</u>	State ID Number	State	DOB(MM/DD/YR)
	<u> Zase i tarre</u>	<u> </u>	1722	State 15 Trainser	<u> </u>	DOD(IVII/DD/TR)
3.						
	A d duese	C:4	Ctata	7:		E-mail Addmaga
	Address	<u>City</u>	State	Zip code		Email Address
	Address	City	State	Zip code		Email Address
	Address	City	<u>State</u>	Zip code		Email Address
					State	
	Address Last Name	<u>City</u> <u>First Name</u>	State MI	Zip code State ID Number	<u>State</u>	Email Address DOB(MM/DD/YR)
					State	
4.	<u>Last Name</u>	First Name	MI	State ID Number	<u>State</u>	DOB(MM/DD/YR)
4.					State	
4.	<u>Last Name</u>	First Name	MI	State ID Number	State	DOB(MM/DD/YR)

3. It is my responsibility to notify my guests of any changes in my training status which may affect my graduation date. I will recommend that they purchase refundable/transferrable tickets because my graduation date may change. I will also inform all guests that they are required to maintain their valid photo ID and Pass at all times.

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	Recruit's Signature

Copy to: File RTC (SECURITY) NAVSTA GREAT LAKES (N3AT)